
1999 WORKERS' COMPENSATION AND SAFETY REPORT



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EXECUTIVE SERVICES DEPARTMENT
PERSONNEL DIVISION**

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Published June 2000

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OVERVIEW



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Five Year Summary

	1995	1996	1997	1998	1999
Workers' Compensation Claims	1,635	1,822	1,641	1,687	1,628
Frequency Rate (per 100 FTE)	17.8	19.5	17.4	16.7	15.9
Severity Rate (Days lost per 100 FTE)	N/A	318	323	279	252
Percent of Claims that are Time Loss	36.8%	36.4%	35.8%	36.9%	37%
Most Common Cause of Injury Lifting	207	219	160	152	158
Most Common Nature of Injury Sprain/Strain	805	876	740	778	638
Most Frequently injured Body Area-Back	418	341	281	254	284
Average Incurred Cost Per Claim	\$5,104	\$4,409	\$4,516	\$4,478	\$4,527
Total Dollars Incurred (paid plus reserves for future costs)	\$8,345,779	\$8,034,005	\$7,410,733	\$7,533,928	\$7,370,533

Significant Developments in 1999

Claims Developments

❖ Frequency rate

For the third consecutive year, the City's Injury Frequency rate declined. The 1999 rate of 15.9 is the lowest in 11 years. All large departments had decreases in their rates, with the Parks Department having the largest decrease; down 2 points from last year. Seattle Center also decreased, while Executive Services and SEATLAN both increased two points. (See pg. 8)

❖ Claims severity rate

The City's overall severity rate decreased significantly for the second straight year; down from 322.8 in 1997, 278.6 in 1998 to 251.5 in 1999. Credit for this remarkable achievement belongs to the departmental return to work coordinators and the Workers' Compensation claims analysts. City Light and Seattle Public Utilities experienced the largest decreases in severity. Those departments with the largest increases in severity were those that also had large increases in the percentage of time loss claims last year. (See pg. 9)



❖ Time loss claims

Time loss claims are those injuries which occurred in 1999 and resulted in time loss. The overall percentage of time loss claims **citywide** again rose by a small amount. Contrary to the citywide trend, some of the larger departments, including Library, City Light, SEATRAN and ESD experienced decreases in their percent of time loss claims. (See pg. 10)

❖ Cause, Nature and Location

In 1999, the Workers' Compensation unit added several new codes to more precisely identify "cause" of accident. *Computer use* was added as a code to differentiate those repetitive strains caused by computers from those arising from other activities such as lifting, and ranked 12th in the most frequent cause of injury. *Sprain/ strain-acute, contusions* and *inflammatory disorders* were the top ranking "nature" of claims. Interestingly, the "location" *indoor office work* was the site of a large number of claims and had the fourth highest five-year average cost, exceeding the costs of claims from other locations such as *aid scene, outdoor field work*, and *arrest situations*. (See pgs.17-31)

Vehicular accidents dropped to seventh as the most common "cause" of injuries, but decreased from sixth to fifteenth in average cost. Total vehicle collision and damage related costs decreased by 13%, mainly as a result of fewer and less costly vehicle-related injuries and less money paid out in lawsuits. (See pg. 54) Repair costs for "damages" remained about the same as 1998, while collision repair costs increased by 9%, probably due to the higher collision rate in 1999 (21 "collisions per million miles" up from 17.9 in 1998). As departments strengthen their safe driving policies and procedures the collision and damage rates should decrease.

Significant Facts about Injured Workers

❖ Multiple claims

Seventy five percent of employees filing claims filed only one claim in the period January 1998 through December 1999. In the same two year period, 25% of employees (606) filing two or more claims were responsible for 44% of the claims filed (1462) and 41% of the total claims costs (\$5,857,709). For the past six years, these percentages have remained fairly stable. This data emphasizes the need to follow up and take appropriate action with individuals who are repeatedly involved in injury incidents. (See pgs.50-51)

❖ Age

For the second year, we note that age is not a major predictor of claims. Although one might think that older workers file more claims, in fact older City workers filed fewer claims than their proportion of the total workforce. In this case, the lower injury claim rate may be due to older workers having less physically demanding work. The age group **31-45** was responsible for 53.6 percent of all claims filed, but comprised only 40.3 percent of the City workforce. The age group 26-30 had the highest percent of employees filing claims, 22 percent. (See pg. 34)



❖ **Length of service**

Employees with less than one year of service and between five and nine years of service had significantly more claims than their proportion of the total workforce. More significantly, more than 30 percent of employees with less than one year of service filed claims. Examination of their job class reveals that, for the most part, these employees work in departments with structured apprenticeship or recruit training programs. Departments with recruit or apprenticeship training programs that have high injury rates may want to evaluate their training programs to see if they can modify them to be safer while still accomplishing the objectives of the program.

Program Initiatives, Results and Issues in 1999

I. Injury Prevention and Safety

The City Safety Unit manages several programs centrally, however, they work closely with department safety staff to insure successful program implementation.

❖ **Pre-employment drug testing**

The Citywide Safety Unit implemented this program in July 1996 to screen out applicants for employment whose illegal drug use increased their likelihood of causing injuries to themselves or others. In 1999, this program screened out 70 substance abusers who would otherwise have been hired. Over the 3 ½ years of the program, 241 applicants have failed the drug test and have been disqualified from city employment for one year. Despite the visibility of the program, the City's drug test failure rate increased from 4.6% of applicants to 6%, attesting to the continued need for and effectiveness of this safety program.

❖ **Medical and Industrial Hygiene Monitoring and Consultation**

The Citywide Safety Unit administered 4466 medical surveillance tests for respiratory clearance, lead and asbestos exposures, Hazmat exams and hearing acuity in 1999. This medical monitoring program provides information for development of worker protection policies. It identifies positions where use of special equipment or job restructuring will result in a safer workplace. It also documents exposure levels in the event of future claims.

The certified industrial hygienist conducted 600 investigations/consultations to assess acute or chronic concerns about the quality of workplace air, exposure to workplace chemicals, noise, other unknown exposures, and office or field ergonomic problems. The City Safety Unit conducted approximately 40 individual ergonomic assessments and provided ergonomic consultation and advice to employees and management.

❖ **Preplacement Medical Examinations**

The Citywide Safety Unit administered 575 preplacement medical examinations in 1999 for job candidates whose positions would involve manual labor, physical agility, or other special physical requirements. The purpose of the examinations is to determine whether or not job candidates are physically capable of safely performing the functions of the job. The examination also provides baseline information for future health status evaluations.



❖ **Policy Development and Safety Consultation**

The City Safety Unit continued to promote the safe driving policy recommendations issued in Fall 1998. Several departments have either implemented or are implementing these policies. The Unit also issued draft respiratory protection guidelines to comply with the WAC regulations issued Fall 1999. The Safety Unit also introduced a management accountability system for safety that involves establishing goals for injury prevention. ESD is conducting a pilot program using this management accountability system.

❖ **Data Provision**

In addition to providing departments with monthly Workers' Compensation injury claims data, the Unit added two new groups in 1999. The unit now sends monthly "work exposure hours" by low org number so departments can monitor their "*injury frequency rate*" throughout the year. In addition, the unit now provides quarterly vehicle collision and repair, third party claims information, and lawsuit data to assist safety staff in focusing and evaluating their injury and collision prevention programs.

❖ **Production of Quarterly Employee Safety Newsletters Citywide**

The Safety Unit increased production of citywide employee safety newsletters to a quarterly schedule in 1999.

❖ **Management of the Department of Transportation (DOT) Drug Testing Program**

The City Safety Unit has successfully managed the Department of Transportation Commercial Driver's License (CDL) and Coast Guard Drug Testing Program, which identified 58 City employees using drugs in the last five years and eight employees in 1999. They also conducted training and coordinated the follow-up rehabilitation programs with a 73% success rate.

❖ **Fitness for Work Consultation and Training**

The City Safety Unit provides consultation and training on Fit for Duty Medical Examinations. They conducted training for 170 management and supervisory staff in 1999. They work with department safety representatives, HR staff, and managers to determine if a medical exam is appropriate when the manager or supervisor suspects a physical or psychological condition may be impairing an employee's ability to work safely.

II. Budget Accountability

With the exception of Temporary Employment Services (TES) and SPU, all departments managed their Workers Compensation claims within their 1999 budget. SPU's over-expenditure reflected an artificially low budget due to a lack of historical claims data costs after the reorganization. For the most part, however, conservative budgeting, fewer incidents, better claims management and earlier return to work resulted in department costs coming in under budget.



❖ **Provider payments**

An important component of managing claims within a budget is to ensure that bills are paid in a timely manner and in compliance with the State of Washington Fee Schedule. Bills from the medical providers must be adjusted down to that rate schedule. Incorrectly adjusted bills add to the City's costs. Workers' Compensation staff work closely with the Finance staff in ESD to make sure bills are paid properly.

III. Claims Management/ Initiatives

Other claims management initiatives also impact the City's ability to manage the costs of the Workers' Compensation program and remain within budget parameters. The following chart summarizes some of the major program area that impact our costs, and demonstrates that Workers' Compensation Unit s effectively managing the fiscal component of claims.

	1996	1997	1998	1999
Number of Open Claims	1904	1662	1575	1447
Average Caseload per Analyst	243	192	139	133
Number of Claims Open after 3 Years	202	169	140	142
Percentage of Total Claims Open after 3 Years	13%	10%	8%	10%
Total Payments	\$8,136,247	\$9,687,706	\$7,594,359	\$7,734,622
Discretionary Claim Costs (Vocational, Consulting, Independent Exams)	\$1,199,386	\$1,429,509	\$946,584	\$787,973
Percentage Decrease in Discretionary Costs			34%	17%
Subrogation Recoveries from 3 rd Parties & Excess Insurance	\$112,606	\$295,701	\$800,507	\$339,612
Customer Service Rankings	3.77	3.43	4.24	4.12

FUTURE INITIATIVES

❖ **ERGONOMICS**

The Washington State Ergonomic Standards were adopted May 26, 2000. The standards require the City of Seattle to identify all "caution zone jobs" in the City and provide ergonomic awareness training to all employees in those jobs and to their supervisors by July 1, 2003. The Workers' Compensation injury classification system will be examined to ensure that we can track ergonomic injuries for those in ergonomically "hazardous" and "caution zone" jobs. The new ergonomic standard identifies specific risk factors that determine whether or not an employee is in a "hazardous" or "caution zone" job. We hope that this program will assist in reducing injuries but realize that the standard is limited in its scope. We expect that most office workers will not be classified as having "hazardous" or "caution zone" jobs. For example, even though we find that the improper use of the mouse is one of the most common causes of discomfort for computer users, the awkward use of a mouse will not be covered under the ergonomic standard.

